

Please type a plus sign (+) inside this box →

PTO/SB/01 (12-97)  
Approved for use through 9/30/00. OMB 0651-0032  
Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

**DECLARATION FOR UTILITY OR  
DESIGN  
PATENT APPLICATION**  
**(37 CFR 1.63)**

Declaration  
Submitted with  
Initial  
Filing

OR  Declaration  
Submitted after Initial  
Filing (surcharge  
(37 CFR 1.16 (c))  
required)

Docket No.	00042/US
First named inventor:	BILLINGHAM, Michael Edward John <i>Complete if known</i>
Application Number	
Filing Date	
Group Art Unit	
Examiner name	

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name.

I believe I am the original, first, and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

**COMPOUNDS WHICH INTERACT WITH THE THYROID HORMONE RECEPTOR FOR THE  
TREATMENT OF FIBROTIC DISEASE**

the specification of which:

[ ] is attached hereto.  
or [x] was filed on 27 May 1999 as PCT International Application No. PCT/GB99/01684  
[ ] and was amended on \_\_\_\_\_ (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined 37 C.F.R. 1.56.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate or of any PCT international application having a filing date before that of the application(s) on which priority is claimed:

Application Number	Country	Foreign Filing Date (MM/DD/YYYY)	Priority not claimed	Certified copy attached?
9811784.9	UNITED KINGDOM	06/02/1998		X
9827834.4	UNITED KINGDOM	12/17/1998		X

Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto

I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional patent application(s) listed below.

Application number(s)	Filing Date (MM/DD/YYYY)

Additional provisional application numbers  
are listed on a supplemental priority data  
sheet PTO/SB/02B attached hereto

Please type a plus sign (+) inside this box →

PTO/SB/01 (12-97)

Approved for use through 9/30/00. OMB 0651-0032  
Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE  
DOCKET No. 00042/US

## DECLARATION - Utility or Design Patent Application

I hereby claim the benefit under 35 U.S.C. 120 of any United States application(s) or 365(c) of any PCT International application designating the United States of America listed below, and insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT international application in the manner provided by the first paragraph of 35 U.S.C 112, I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.

U.S. Parent Application or PCT Parent Number(s)	Parent Filing Date (MM/DD/YYYY)	Parent Patent Number (if applicable)

Additional US or PCT international application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto

**Power of Attorney:** As a named inventor, I hereby appoint the following registered practitioner(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith:  
**Name** Martin A. Hay      **Registration No.** 39,459      **Name**      **Registration No.**

Additional registered practitioner(s) named on supplemental Registered Practitioner Information sheet PTO/SB/02C attached hereto said Martin A. Hay to have in addition the power to sub-authorize or to revoke the power granted to all others listed above.

Please direct all correspondence in this case to:

MARTIN A. HAY AND CO  
13 Queen Victoria Street  
Macclesfield  
Cheshire SK11 6LP  
UNITED KINGDOM

direct telephone calls to:  
(name, telephone and fax no.)

Martin Hay

telephone 0044 1625 500057  
fax 0044 1625 500058

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Full Name of Sole or First Inventor:

A petition has been signed for this unsigned inventor

Inventor's Signature:

Date: 31st October 2000

Residence Address : Michael Edward John BILLINGHAM

: St. Michaels, South Road, Alresford, Hants SO24 9HR, GB

Post Office Address

: same as above

Citizenship : GB

Additional inventor(s) named on supplemental Additional Inventor(s) sheet PTO/SB/02A attached hereto

Please type a plus sign (+) inside this box →

PTO/SB/02A (3-97)

Approved for use through 9/30/98. OMB 0651-0032  
Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE  
DOCKET No. 00042/US

DECLARATION		ADDITIONAL INVENTOR(S) Supplemental Sheet	
Full Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been signed for this unsigned inventor	
Inventor's Signature:	 Janet Katherine FERNIHOUGH		
Residence Address	: The Garden Flat, 39 Livingstone Road, Oldfield Park, Bath BA2 3PH, GB.		
Post Office Address	: same as above	Citizenship	: GB
Full Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been signed for this unsigned inventor	
Inventor's Signature:	Date: _____		
Residence Address	:		
Post Office Address	: same as above	Citizenship	: GB
Full Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been signed for this unsigned inventor	
Inventor's Signature:	Date: _____		
Residence Address	:		
Post Office Address	: same as above	Citizenship	:
Full Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been signed for this unsigned inventor	
Inventor's Signature:	Date: _____		
Residence Address	:		
Post Office Address	: same as above	Citizenship	:
Full Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been signed for this unsigned inventor	
Inventor's Signature:	Date: _____		
Residence Address	:		
Post Office Address	: same as above	Citizenship	: